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AUG 19 2005

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FACSIMILE COVER SHEET

TO: Examiner Gabriel I. Garcia
Group Art Unit 2624

FROM: Michael K. O'Neill

RE: U.S. Application No. 10/625,673
Atty. Docket No.: 03560.002263.1

FAX NO.: (571) 273-8300

DATE: August 19, 2005 **NO. OF PAGES:** 13
(including cover page)

TIME: 3:26

SENT BY: *JKM*

MESSAGE

Attached is an Amendment in response to the Office Action dated May 19, 2005.

I hereby certify that this correspondence is being facsimile transmitted to
the U.S. Patent and Trademark Office on:

August 19, 2005
(Date of Deposit)

Michael K. O'Neill; Reg. No. 32,622
(Name of Attorney for Applicant)

Michael K. O'Neill AUGUST 19, 2005
Signature Date of Signature

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In re Application of:

Docket No. 03560.002263.1

NAOHTRO YOSHIKAWA

Application No.: 10/625,673

Examiner: G. Garcia

Filed: July 24, 2003

Group Art Unit: 2624

For: PRINTER CONTROL BASED ON DETECTION
OF ENVELOPE-SIZED PRINT MEDIUM
(AS AMENDED)

Date: August 19, 2005

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

 No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 15	MINUS	** 20	= 0	x \$25 \$50	- 0 -
INDEP. CLAIMS	* 3	MINUS	*** 9	= 0	x \$100 \$200	- 0 -
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						- 0 -

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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I hereby certify that this correspondence is being facsimile transmitted
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(Date of Deposit)Michael K. O'Neill, Reg. No. 32,622
(Name of Attorney for Applicant)

 August 19, 2005
 Signature _____ Date of Signature _____

Verified Statement claiming small entity status is enclosed, if not filed previously.

A check in the amount of \$_____ is enclosed.

Charge \$_____ to cover the Information Disclosure Statement fee to Deposit Account No. 06-1205.

Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.

A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Michael K. O'Neill

Attorney for Applicant
Michael K. O'Neill
Registration No.: 32,622

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03560.002263.1

PATENT APPLICATION

AUG 19 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
 NAOHIRO YOSHIKAWA) Examiner: G. Garcia
 Application No.: 10/625,673) Group Art Unit: 2624
 Filed: July 24, 2003)
 For: PRINTER CONTROL BASED ON)
 DETECTION OF ENVELOPE-) August 19, 2005
 SIZED PRINT MEDIUM)

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

AMENDMENT

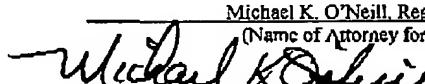
Sir:

In response to the Office Action dated May 19, 2005, please amend the
 above-identified application, as follows:

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 the U.S. Patent and Trademark Office on:

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 (Date of Deposit)

Michael K. O'Neill, Reg. No. 32,622
 (Name of Attorney for Applicant)


 Signature August 19, 2005
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